Fill in this ir	nformation to identify	the case:			
Debtor 1	Jason A. Kroah				
Debtor 2	Amy M. Kroah				
(Spouse, if filing)		Northern	District of Ohio		
United States Bankruptcy Court for the:			DISTRICT OF		
Case number	16-61818-rk		(State)		

## Form 4100R

# **Response to Notice of Final Cure Payment**

10/15

Name of creditor:	U.S. Bank Trust N Trustee of the Cha							<b>Court</b> c <u>13-1</u>	laim no	(if known)
Last A digits of any	number you use to ic	dentify the debt	or's account	6	0	7	3			
	•	4184 Chester Ave NE								
Property address:	Number Street			_						
	Louisville	OH	44641							
	City	State	ZIP Code	=						
art 2: Prepetitio	n Default Payment	_								
Check one:										
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Case number (if known) \_ 16-61818-rk

Part 4:

#### **Itemized Payment History**

If the creditor disagrees in Part 2 that the prepetition arrearage has been paid in full or states in Part 3 that the debtor(s) are not current with all postpetition payments, including all fees, charges, expenses, escrow, and costs, the creditor must attach an itemized payment history disclosing the following amounts from the date of the bankruptcy filing through the date of this response:

- all payments received;
- all fees, costs, escrow, and expenses assessed to the mortgage; and
- all amounts the creditor contends remain unpaid.

Part 5:

Sign Here

The person completing this response must sign it. The response must be filed as a supplement to the creditor's proof of claim.

Check the appropriate box::

- ☐ I am the creditor.
- I am the creditor's authorized agent.

I declare under penalty of perjury that the information provided in this response is true and correct to the best of my knowledge, information, and reasonable belief.

Sign and print your name and your title, if any, and state your address and telephone number if different from the notice address listed on the proof of claim to which this response applies.

Date 5 ,26 ,2020

Signature

Print

Molly Slutsky Simons

Attorney for Creditor

Company

Sottile and Barile, Attorneys at Law

If different from the notice address listed on the proof of claim to which this response applies:

Address

394 Wards Corner Road, Suite 180

Number

Loveland OH 45140 ZIP Code

City

<sub>(513)</sub> 444 \_ 4100

Email bankruptcy@sottileandbarile.com

Form 4100R

Contact phone

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO CANTON DIVISION

In Re: Case No. 16-61818-rk

Jason A. Kroah
Amy M. Kroah
Chapter 13

Debtors. Judge Russ Kendig

#### **CERTIFICATE OF SERVICE**

I certify that on May 22, 2020, a true and correct copy of this Agreed Response to Notice of Final Cure was served:

Via the Court's ECF System on these entities and individuals who are listed on the Court's Electronic Mail Notice List:

Debra E. Booher, Debtors' Counsel charlotte@bankruptcyinfo.com

Dynele L. Schinker-Kuharich, Trustee dlsk@chapter13canton.com

Office of the U.S. Trustee (registeredaddress)@usdoj.gov

And by regular U.S. Mail, postage pre-paid on:

Jason A. Kroah, Debtor 4184 Chester Ave. NE Louisville, OH 44641 Amy M. Kroah, Debtor 4184 Chester Ave. NE Louisville, OH 44641

### Respectfully Submitted,

#### /s/ Molly Slutsky Simons

Molly Slutsky Simons (0083702) Sottile & Barile, Attorneys at Law 394 Wards Corner Road, Suite 180 Loveland, OH 45140

Phone: 513.444.4100

Email: bankruptcy@sottileandbarile.com

Attorney for Creditor